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Substitute for form 1449/PTO	Complete If Known			
	Application Number	10/764,532-Conf. #4091		
INFORMATION DISCLOSURI	Filing Date	January 27, 2004		
STATEMENT BY APPLICAN	First Named Inventor	Yasuyuki SHIRASAKA		
	Art Unit	2815		
(Use as many sheets as necessary)	Examiner Name	M. B. Shingleton		
Sheet 1 of 1	Attorney Docket Number	1248-0691P		

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Signature	/	Considered

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Examiner Cise Initials No.	hitists No. the item (book, magazine, journel, serial, symposium, catalog, etc.), date, page(s), volume-issue 1 th number(s), publisher, city and/or country where published.			
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Examiner Signature		Date Considered		

EXAMINER: Initial il inference considered, whether or not clisson is in conformance with MPEP 609. Draw sine through civation if not in conformance and considered, include copy of this form with next communication to applicant.

Applicants unique claffon designation number (optional). Applicant is to place a check mark here of English language Translation is attached.

